



# Mental Health Reform

Promoting Improved Mental Health Services

## **Submission on the Department of Health's public consultation on the scope for private health insurance to incorporate additional primary care services**

**30<sup>th</sup> January 2015**

Mental Health Reform (MHR) welcomes this opportunity to contribute to the Department of Health's consultation on the scope for private health insurance to incorporate additional primary care services. As the national coalition promoting improved mental health services and implementation of Ireland's national mental health policy A Vision for Change (AVFC), Mental Health Reform, makes this submission with particular reference to individuals experiencing mental health difficulties.

The World Health Organisation (WHO) has highlighted that primary care mental health services can play a key role in increasing access to treatments for mental health difficulties. This is further endorsed by A Vision for Change which recognises a 'pivotal role' for primary care in providing mental health care. The primary care system addresses 90% of poor mental health in Ireland. For most people who experience poor mental health, their first port of call for professional support will be their local GP.

The best use of both specialist and primary mental health services occurs when an individual can get the help they need at the lowest level of support appropriate for them. That means accessing support through primary care in the first instance and only accessing specialist mental health services when and for as long as necessary. Mental health care, including appropriately trained GPs and psychologists at primary care level, is likely to reduce inappropriate referrals to mental health services, resulting in a more efficient use of resources. It can also improve the accessibility of services in accordance with the State's obligations under human rights standards.

### **What is the optimal level of cover for primary care services and GP services that would be available in private health insurance contracts?**

The national mental health policy A Vision for Change assigns a key role to GPs as 'gatekeepers' to specialist mental health services who will detect and diagnose mental health difficulties and either treat the individual or refer him/her to specialist services.

Despite initiatives that have been implemented to build capacity within the primary care sector to address mental health difficulties, there is scope for private health insurance to further underpin mental health care in primary care. In particular, private health insurance should:

- **Compensate GPs for the provision of mental health care, ensuring that such compensation enables GPs to give adequate time to the mental health component of their patients' care**

and for the provision of follow-on support to individuals discharged from mental health services

- Cover counselling and psychological services for adults and children at a level that reflects good practice. Irish research indicates that the majority of clients would require 20-45 sessions to recover.<sup>1</sup> There is ample evidence that offering counselling and psychological therapy in primary care is a cost-effective measure (see Mental Health Reform (2013) *Mental Health in Primary Care in Ireland: A Briefing Paper*). Provision of psychological support for children at risk of developing a mental health difficulty and their families can also play an important part in the provision of mental health care for children and families
- Include specific cover for the provision of physical health care and health screening to people who experience long-term mental health difficulties. A Vision for Change recognised that people in this group are at higher risk of physical health problems. Considering that people with long-term mental health difficulties live up to 25 years less than the general population, this could help to improve the physical health outcomes for this group
- Ensure that insurance coverage for addiction services incentivises the provision of integrated mental health and addiction supports, e.g. by ensuring that addiction services are required to professionally assess and provide mental health care tailored to the individual's needs

**Are there any measures that the State should take to mandate or incentivise the provision and/or purchasing of such cover?**

As a matter of principle, the State should seek to ensure that private health insurance for primary care incorporates adequate coverage for mental health care. This could be achieved by adopting a parity principle between physical and mental health care, or by providing specific mandates/incentives for mental health care. The context for such a principle is the historic underfunding of mental health care in primary care.

While not specifying, A Vision for Change recommended that a wide range of incentive schemes should be introduced to ensure mental health treatment and care can be provided in primary care.

The Mental Health Commission further endorsed this in its analysis of the implementation of A Vision for Change. They note: “there can be little progress in the provision of high quality recovery focused mental health services without.... incentivising quality (e.g. supporting evidence-based clinical practice)....There is a need to start using existing, mainstream community resources in a more proactive way, to move away from the costly and unsustainable model of mental health services providing ‘everything’.”<sup>2</sup>

Specific measures have been cited to incentivise the provision of mental health services through primary care.<sup>3</sup> Some of these measures include:

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<sup>1</sup> Carr, A. (2007) *The Effectiveness of Psychotherapy: A Review of Research prepared for the Irish Council of Psychotherapy*, Dublin: Irish Council of Psychotherapy.

<sup>2</sup> Mental Health Commission. (2009). *From Vision to Action? An Analysis of the Implementation of A Vision for Change*. MHC, Dublin

<sup>3</sup> American Academy of Pediatrics, Task Force on Mental Health (2007). *Strategies for System Change in Children's Mental Health: A Chapter Action Kit*. Elk Grove Village, IL: American Academy of Pediatrics.

- **GPs and other primary care professionals should be reimbursed for providing mental health care, including their time spent on restructuring services to encompass mental health, as well as their time spent in the development of collaborative clinical relationships with mental health specialists**
- **Financial and administrative supports should be made available to support the integration of mental health care in primary care settings and, where appropriate, mental health resources should be restructured to include primary care clinicians in mental health**

**Should any cover be compulsory (e.g. as part of the minimum packages that insurers must offer) or optional?**

The question of minimum cover within private health insurance depends on the extent that public health services are funded by the State. In the context of universal health insurance, it would be important that all of the items detailed in Question 1 would be covered as a minimum.

**To what extent should limiting terms be allowed (e.g. number of visits allowable, the amount payable per visit etc)?**

Please see above in answer to Question 1.

**How can we encourage a real transfer of provision of services from the acute hospital setting to primary care, so that we are not simply adding to volume and costs?**

A Vision for Change recommends that “all individuals should have access to a comprehensive range of interventions in primary care for disorders that do not require specialist mental health services.”

Mental Health Reform recommends implementation of a shared care approach, specifically the consultation/liaison model between primary and secondary/tertiary mental health services. The objective of the consultation/ liaison model is to enable GPs to learn about mental health from specialists; to create clear pathway between primary and secondary care; and to reduce referrals to secondary care for mild to moderate mental health difficulties.

The shared care approach is supported by the World Health Organisation and is further endorsed by Ireland’s mental health policy and the Mental Health Commission. The HSE’s Guidance paper on a shared care approach to primary care and mental health services also sets out specific recommendations for its implementation.

In addition to the recommendations above on incentivising mental health service provision through primary care, Mental Health Reform recommends the following measures to support the transfer of services from secondary care to primary care level:

- **The HSE should develop a national implementation plan to implement shared mental health care in primary care. This plan should be agreed with all of the relevant disciplines, including the ICGP and the CPI. This plan should build on the HSE’s guidance paper Advancing the Shared Care Approach between Primary Care & Specialist Mental Health Services**

- **Protocols and policies should be agreed locally by primary care teams and community mental health teams , in line with A Vision for Change**
- **Government should progress regulation of counselling and psychotherapy and extend the Counselling in Primary Care Service**
- **GPs should be supported through training and education to enhance their capacity in the area of mental health. The HSE should develop a directory of information for GPs on options for care and support, including information on local community based supports**
- **The HSE should implement its recommendations on addiction services contained in its guidance on primary care and mental health**
- **Government should ensure that mental health and substance misuse services in primary care will be provided for under the new Universal Health Insurance scheme**

### **What is the capacity of GP practices to deliver insurance-funded primary care of the type suggested here?**

While there have been some initiatives to increase the capacity of GPs to provide mental health care, including e-learning modules through the ICGP and a course provided by Dublin City University to approximately 100 primary care professionals, there has not been a national programme to ensure that all GPs have adequate training in mental health in primary care. Mental Health Reform recommends there are three key areas that can fundamentally enhance the capacity of GP practices to provide appropriate mental health care. These three areas include:

- **Training of primary care professionals in mental health**
- **Increased access to psychological therapies through primary care**
- **Supporting dual diagnosis through primary care**

The WHO states that it is crucial for GPs and other primary health care staff to receive training in identifying and treating poor mental health. This training should occur at every stage of their education and in their careers through short courses, continuing education, and on-going supervision and support. A Vision for Change also notes that the majority of GP training occurs within specialist mental health services and that “GPs [in training] often do not experience the type of mental health and social problems they will experience in primary care settings.” As mentioned above, the HSE funded a primary care mental health training programme in recent years; however the number of GPs that have received this training is marginal. A national roll out of this training should be delivered to engage all GPs in every part of the country.

In keeping with the shared care approach psychological therapies should be made accessible through primary care for all individuals who do not require specialist mental health care. The WHO argues that there can be successful treatment of depression in primary care using a combination of medication and psychotherapy/counselling, while a 2007 study in the UK provides evidence that counselling in primary care brings improvements compared with normal GP care. There is also evidence that providing counselling through primary care is cost-effective. The HSE Working Group on Mental Health in Primary Care cited a 2001 study in the UK which found that counselling led to savings in the UK. There were fewer referrals to National Health Service (NHS) Out-Patient Services and fewer GP consultations in the year after counselling. In the UK, the National Institute for Health and Clinical Excellence (NICE) advocates that the NHS should provide psychological therapies.

The primary care strategy Primary Care: A New Direction sets out that primary care services will cover the general aspects of both mental health and 'drug misuse'. Primary care professionals play an important role in supporting individuals with dual diagnosis from initial detection, diagnosis and referral. GPs should be supported to provide on-going support to individuals with a dual diagnosis who have been discharged from specialist services. GPs should also be trained to meet the physical health needs of individuals with a dual diagnosis who are at higher risk of physical health problems than the general population. Implementation of the HSE Working Group's recommendations on addiction services would go some way to improving the experience of people with a dual diagnosis who seek help through primary care.

### **Should primary care cover be in a separate health insurance plan or as part of in-patient plans?**

In the context of mental health care, it would be important that health insurance underpins effective coordination of inpatient, outpatient and primary mental health care. If covered separately, there would be a risk that individuals would select one or the other cover which could undermine adequate integration of care and follow-on support.

### **Conclusion**

Mental Health Reform is the national coalition of 50 organisations working to promote improved mental health services and the implementation of the mental health policy *A Vision for Change*.

Mental Health Reform is available to discuss the above recommendations. Please contact Kate Mitchell, Policy and Research Officer at 01 874 9468 or via email at [kmitchell@mentalhealthreform.ie](mailto:kmitchell@mentalhealthreform.ie) for further information.